

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

SERIAL NO.

FILED DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1						
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48						
49						
50						
TOTAL IND.	3					
TOTAL DEP.	25					
TOTAL	28					

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
51		/				
52						
53						
54	/					
55		/				
56		/				
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TOTAL IND.						
TOTAL DEP.						
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